The Organising Committee of PANDDA Australia Inc. is delighted to welcome you to the annual PANDDA Conference.

Through the Looking Glass...
Wisdom, Reflection, Experience
ACKNOWLEDGEMENTS

TECHNICAL PROGRAM COMMITTEE
Technical Program Convenor: Sue Easton
Committee Members: John Ryan, Nathan Wilson, Gail Tomsic, Alicia Rogers, Maree McCulluch, Kathryn Coote, Penny Kearney

CONFERENCE COMMITTEE
Conference Co-Convenor
Bob Weaver & Damian Heron
Technical Program Convenor
Sue Easton
Conference Registrar/Convenor Registration Desk
Maree McCulloch
Sponsorship Convenor
Janice Jankovic
AGM Convenor
John Ryan
Treasurer
Russell Jones
PANDDA Awards Convenor
Catharine Hulst
Photographer
Louise Hedges
Committee Members
Lorraine Coughlin and Linda Goddard, Norma Cloonan

PANDDA COMMITTEE MEMBERS
President
Linda Goddard
Vice-President
Bob Weaver
Treasurer
Russell Jones
Assistant Treasurer
John Ryan
Secretary
Sue Easton
Membership Secretary
Norma Cloonan
Assistant Membership Secretary
Lorraine Coughlin
Publicity Officer
Louise Hedges
Newsletter Editor
Catharine Hulst
Conference Convenors
Bob Weaver and Damian Heron
Executive Members
Bernadette Adams, Lorraine Coughlin, Phillip Carruthers, Helen Bowes, Emma O’Neill, Janice Jankovic, Damian Heron, Alicia Rodgers

CONFERENCE SPONSORS

Family & Community Services
Global Disability & Health Care Services
Epilepsy Action Australia
WebsterCare – piece of mind with medication
NSW Agency for Clinical Innovation
NSW Nurses & Midwives Association
Kimberly Clark Personal Care Australia
Ch2 Your Partner Delivering Excellence in Healthcare Supply Solutions
Independence Australia
Bridge the Gap Training & Assessment
ArjoHuntleigh – GETINGE GROUP
HSNet Department of Family and Community Services | NGO Services
**PRESIDENT’S WELCOME**

Welcome to the Professional Association of Nurses in Developmental Disability Australia (PANDDA) 2014 Conference. The PANDDA conference committee members are going from strength to strength, once again organizing a very interesting two day event.

The program includes a number of quality speakers sharing their wisdom, reflections and experiences. The presenters come from a range of backgrounds including nursing and a range of professions who work in partnership ensuring that the needs of people with disabilities and their families are met. It is important that we hear the voices of parents telling us their stories, offering insight into their journey with their sons and daughters and their families. Welcome to Helen Sage and Maria Heaton, we look forward to hearing your presentations.

Change is all around us, this may result in fear as people with disabilities and their families wonder if there will be a service for them in the future. The National Disability Insurance Scheme is a vision, for some it is becoming a reality, we welcome the update on what is happening from Mary Hawkins. Our esteemed colleague Jim Simpson is tireless in his role as advocate for people with intellectual disabilities his presentation will update us on his work. This conference will showcase the work of professionals from Australia and New Zealand including, nurses, occupational therapists, speech pathologists, doctors, psychologists, dieticians and other specialists all reflecting on a wealth of experience and wisdom.

The nurse in the area of intellectual disability might often wonder if they have a role in the ‘new world’. We do know that we have a skill set that is unlike any other profession, it is important that we move forward with confidence. Nurses in intellectual disabilities across the world are doing amazing work. It is important to showcase this work, to advocate for people that we work with to show what is possible.

This conference is a celebration of 25 years of PANDDA, a quarter of a century. May the work of PANDDA continue for another 25 years. Thank you everyone in attendance for the work that you do on a daily basis, your commitment to the people that you work with and to each other. It is important for all of us to use this time to reflect on our experiences together, and use our wisdom to look at how we can plan for the years ahead.

Dr Linda Goddard
PANDDA President

**CONVENOR’S WELCOME**

We are delighted to welcome you to Sydney and Parramatta for the 25th Annual PANDDA Conference. The theme for this year’s Conference is Through the Looking Glass Wisdom, Reflection, Experience.

“For, you see, so many out-of-the-way things had happened lately, that Alice had begun to think that very few things indeed were really impossible.” (Lewis Carroll, Alice’s Adventures in Wonderland and Through the Looking-Glass)

We trust you will leave the Conference like Alice believing that many things are indeed possible. The PANDDA Annual Conference will be marking 25 years strong this time around and with keynote and Invited Speakers from across Australia and New Zealand attending, it promises to be our biggest and best. The Conference Program will provide our delegates with a diverse range of topics that are sure to both challenge and stimulate our nursing practice.

We are delighted to be able to offer an exciting range of Keynote and Invited Speakers, and such good friends of PANDDA as Chris Atkins, Seeta Durvasula, Jim Simpson, Maria Heaton, Carol Welsh and Playback Theatre all making a return visit to PANDDA in this our 25th Celebration year. We are also honoured to welcome Helen Sage and Mary Hawkins making their first visit to a PANDDA Conference. All this and 21 Program Speakers, five of whom are making a return visit to the Conference. We are delighted to welcome back Dina Whatnell from New Zealand and Nathan Wilson, Julian Trollor, Roger Standcliffe and Ross Fear. Uncle Greg Simms will again warmly offer us a Welcome to Country. Again our Sponsors have been generous and willing partners in this our 25th year, particular mention to the NSW Families & Community Services for their financial assistance.

It is always great catching up with familiar faces or making new connections during our annual conference, whether it be participating in a presentation or having discussion with others that share your passion during the regular breaks. Why not come along to the annual dinner dance to further enhance the networking opportunities and have a great time along the way. As Kool and the Gang famously sang… Wah-ho, Wah-ho, Celebration good times, come on… It’s a celebration!

We look forward to meeting you all.

Bob Weaver and Damian Heron
Co-Convenors on behalf of the Conference Committee
## DAY 1. WEDNESDAY 15 OCTOBER 2014

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
</table>
| 09.00–09.05 | **Opening Day 1**  
Sue Easton, Convenor Technical Program                                  |
| 09.05–09.20 | **Welcome to Country**  
Uncle Greg Simms                                                          |
| 09.20–09.35 | **Welcome**  
Dr Linda Goddard, PANDDA President; Bob Weaver and Damian Heron, Conference Convenors |
| 09.40–10.25 | **Keynote Speaker**  
Dr Chris Atkins: Adventures in Disabilityland  
Chair: Sue Easton, Convenor Technical Program                               |
| 10.30–11.15 | **Invited Speaker**  
Helen Sage: Author of ‘A Flower Between the Cracks’, in Conversation with Dr Penny Kearney |
| 11.15–11.45 | **MORNING TEA, VISITS TO TRADE DISPLAYS AND MASSAGE**                     |
| 11.45–12.30 | **Keynote Speaker**  
Dr Seeta Durvasula  
Answering Gauguin’s questions: Changing perspectives on the health of people with intellectual disability  
Chair: Linda Goddard, PANDDA President                                      |
| 12.35–13.05 | **Concurrent Sessions**                                                   |
|           | **SESSION A: MADISON ROOM 1**  
Chair: Damian Heron, PANDDA Conference Co-Convenor  
Don’t take it lying down – Sharing the journey of enteral nutrition from a large residential centre  
Ms Leanne Bowie, Ms Vicki Bell, Ms Rachael Filby, Mrs Aimee Taylor, Large Residential Centre Specialist Supported Living, State-wide Services North |
|           | **SESSION B: JARRAH ROOM**  
Chair: Helen Bowes, PANDDA Committee  
The utilisation of online webinar technology to provide health information to families of children with a developmental disability  
Marijke Mitchell, Royal Children’s Hospital, Melbourne Victoria |
|           | **SESSION C: AVALON ROOM**  
Chair: Bob Weaver, PANDDA Conference Co-Convenor  
Put a smile on their dial  
Ms Dina Whatnell, Palmerston North Hospital, New Zealand |
| 13.05–14.05 | **LUNCH, VISITS TO TRADE DISPLAYS AND MASSAGE**                           |
| 14.05–14.35 | **Concurrent Sessions**                                                   |
|           | **SESSION D: MADISON ROOM 1**  
Chair: Janice Jankovic, PANDDA Committee  
A clinicians’ guide to caring for people with gastrostomy tubes and devices  
Kirsten Campbell and Tanya Hazelwood – NSW Agency for Clinical Innovation |
|           | **SESSION E: JARRAH ROOM**  
Chair: Damian Heron, PANDDA Conference Co-Convenor  
Transition to retirement: Outcomes from a 3-year study of inclusive community participation  
Roger Stancilffe, The University of Sydney |
|           | **SESSION F: AVALON ROOM**  
Chair: Phillip Carruthers, PANDDA Committee  
Six months in a leaky boat – Meeting the incontinence needs for individuals in a large residential setting  
Julieann Crawley, Louise Undery and Tania Eddon, Large Residential Centre Specialist Supported Living State-wide Services North |
| 14.40–15.25 | **Lennox Room**  
PANDDA Inc. Annual General Meeting  
AGM Convenor and Chair: Russell Jones, PANDDA Treasurer                     |
| 15.25–16.00 | **AFTERNOON TEA, VISITS TO TRADE DISPLAYS AND MASSAGE**                   |
| 16.00–16.40 | **Lennox Room**  
**Invited Speaker**  
Carol Welsh, Epilepsy Action Australia  
Epilepsy, ageing and intellectual disability  
Chair: Damian Heron, PANDDA Conference Co-Convenor                           |
| 16.40–16.55 | **Day 1 close, followed by Welcome Reception. Hosts: PANDDA Committee**   |
| 19.00     | **PANDDA Dinner Dance. Hosts: PANDDA Committee**                          
As Kool and the Gang famously sang… Wah-ho, Wah-ho, Celebration good times, come on… It’s a celebration! |

---

The conference was titled "Through the Looking Glass... Wisdom, Reflection, Experience."
## DAY 2. THURSDAY 16 OCTOBER 2014

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>08.50–08.55</td>
<td><strong>Opening Day 2</strong> Sue Easton, Convenor Technical Program</td>
</tr>
<tr>
<td>09.00–09.10</td>
<td><strong>Welcome</strong> Dr Linda Goddard, PANDDA President; Bob Weaver and Damian Heron, Conference Convenors</td>
</tr>
<tr>
<td>09.15–09.45</td>
<td>Ms Beth Turner and Professor Julian Trolor, University of NSW</td>
</tr>
<tr>
<td>09.50–10.25</td>
<td><strong>Concurrent Sessions</strong></td>
</tr>
<tr>
<td></td>
<td>SESSION G: MADISON ROOM 1</td>
</tr>
<tr>
<td></td>
<td>Chair: Helen Bowes, PANDDA Committee</td>
</tr>
<tr>
<td></td>
<td>Maternity care for women with intellectual disability</td>
</tr>
<tr>
<td></td>
<td>Ms Namira Williams, Manning Hospital, Taree, Hunter New England Health District, NSW</td>
</tr>
<tr>
<td></td>
<td>SESSION H: JARRAH ROOM</td>
</tr>
<tr>
<td></td>
<td>Chair: Janice Jankovic, PANDDA Committee</td>
</tr>
<tr>
<td></td>
<td>Providing palliative and end of life care in residential disability services</td>
</tr>
<tr>
<td></td>
<td>Vicki Manton, Yooralla Victoria</td>
</tr>
<tr>
<td></td>
<td>SESSION I: AVALON ROOM</td>
</tr>
<tr>
<td></td>
<td>Chair: Phillip Camuthers, PANDDA Committee</td>
</tr>
<tr>
<td></td>
<td>Young adults with intellectual disability and transition staff reflect on sexual health needs — Experience, wisdom and education</td>
</tr>
<tr>
<td></td>
<td>Dr Nathan J Wilson and Dr Patsie Frawley, University of Western Sydney</td>
</tr>
<tr>
<td>10.30–11.05</td>
<td><strong>SESSION J: MADISON ROOM 1</strong></td>
</tr>
<tr>
<td></td>
<td>Chair: Maree McCulloch, PANDDA Conference Registrar</td>
</tr>
<tr>
<td></td>
<td>Providing and valuing health support for people with developmental/intellectual disability</td>
</tr>
<tr>
<td></td>
<td>Sandra Capito, Yooralla Victoria</td>
</tr>
<tr>
<td></td>
<td>SESSION K: JARRAH ROOM</td>
</tr>
<tr>
<td></td>
<td>Chair: Damain Heron, PANDDA Conference Co-Convenor</td>
</tr>
<tr>
<td></td>
<td>Diagnostic minefield: Older people with Down syndrome</td>
</tr>
<tr>
<td></td>
<td>Miriam Philomena, Down Syndrome Association NSW</td>
</tr>
<tr>
<td>11.05–11.35</td>
<td>MORNING TEA, VISITS TO TRADE DISPLAYS AND MASSAGE</td>
</tr>
<tr>
<td>11.35–13.00</td>
<td><strong>PLAYBACK THEATRE</strong></td>
</tr>
<tr>
<td></td>
<td>Playback Theatre explores issues, brings to life personal stories, opens communication channels and brings people together. It is a compelling blend of facilitation, reflection, entertainment and learning. Through story and performance, audiences gain insights into their colleagues’ experiences, find points of connection and difference, and enjoy a cleverly improvised and relevant show.</td>
</tr>
<tr>
<td>13.00–14.00</td>
<td>LUNCH, VISITS TO TRADE DISPLAYS AND MASSAGE</td>
</tr>
<tr>
<td>14.00–14.40</td>
<td><strong>Invited Speaker Maria Heaton</strong></td>
</tr>
<tr>
<td></td>
<td>Chair: Linda Goddard, PANDDA President</td>
</tr>
<tr>
<td>14.45–15.30</td>
<td><strong>Invited Speaker Mary Hawkins, Branch Manager, NDIA</strong></td>
</tr>
<tr>
<td></td>
<td>Chair: Linda Goddard, PANDDA President</td>
</tr>
<tr>
<td>15.30–16.00</td>
<td>AFTERNOON TEA, VISITS TO TRADE DISPLAYS AND MASSAGE</td>
</tr>
<tr>
<td>16.00–16.45</td>
<td><strong>Keynote Speaker Jim Simpson</strong></td>
</tr>
<tr>
<td></td>
<td>The NDIS — opportunities and challenges for better lives and better health</td>
</tr>
<tr>
<td></td>
<td>Chair: Damian Heron, PANDDA Conference Co-Convenor</td>
</tr>
<tr>
<td>16.45–17.00</td>
<td><strong>The Chris Atkins and Bob Weaver PANDDA Awards … and the winners are …</strong></td>
</tr>
<tr>
<td></td>
<td>Awards Convenor: Catharine Hulst</td>
</tr>
<tr>
<td>17.00</td>
<td><strong>Invitation to 26th PANDDA Conference 2015</strong></td>
</tr>
<tr>
<td></td>
<td>25th PANDDA Conference Close followed by Farewell Drinks</td>
</tr>
</tbody>
</table>
KEYNOTE SPEAKERS

DR CHRIS ATKINS RN PhD MACN
Chris is a nurse leader in Australia, and has a long history in Intellectual/Developmental Disability Nursing and in PANDDA. Her chief interests have been the health of people with intellectual disability and chronic and complex health care needs and their families, as well as the education and promotion of Intellectual/Developmental Disability Nurses in the support of these people. Her doctoral thesis relied on the reports of Nurses to explain quality of life for people with intellectual disability and chronic and complex health care needs. She was a founding member and past president of PANDDA and has held executive positions. In recognition, PANDDA presents the Chris Atkins Award Annually.

DR SEETA DURVASULA
Seeta Durvasula is a medical practitioner and Clinic Director of two multidisciplinary clinics for people with intellectual disability. She is a Lecturer in Developmental Disabilities with the Centre for Disability Studies, Sydney Medical School, University of Sydney. She teaches in the medical program at the university and supervises general practitioner registrars. Her research interests are in mortality, falls, vitamin D deficiency and health outcomes in people with intellectual disability.

MR JIM SIMPSON
Jim Simpson is a lawyer and advocate who has worked in the disability field for thirty years. Moving from private legal practice as a partner in a mid city firm, he took a central role in establishing the Intellectual Disability Rights Service in Sydney. He does systemic advocacy work as Senior Advocate for the NSW Council for Intellectual Disability. Jim is a presiding member of the NSW Guardianship Tribunal and Mental Health Review Tribunal and does consultancy work for other organisations.

INVITED SPEAKERS

HELEN SAGE
In June 1999, while on a university placement in the Adelaide hills, one of Helen Sage’s twin daughters was critically injured in a catastrophic car accident. Jayne was in coma for nine weeks, slowly awakening to the impacts of severe acquired brain injury and to long, arduous years of rehab. Now, despite diverse, ongoing challenges, Jayne and her family live each day with creative ingenuity amid a sustaining gratitude for Nature and life’s simple pleasures. Since the publication of her book ‘A Flower between the Cracks’ Helen has shared aspects of the story via magazine features, newspaper articles and radio interviews and by participating on a Sydney Writer’s Festival panel called ‘Writing Through Painful Experiences’.

MARIA HEATON
Maria is the mother of three children, two of whom have a diagnosis of Isolated Lissencephaly Sequence. Tristan was born in Sept 1996 and Tiarna in May 2000, sadly both have since passed away. Tiarna in 2003 aged 3 years and 3 months and Tristan in 2014 aged 17 years and 10 months. She has a Masters in Nursing Education and currently works as a CNC in Paediatric Palliative Care, over the years she has used her nursing background to educate health professionals about how to communicate with the person with intellectual disability and their families. She is passionate about health care for people with disabilities and is a board member with the NSW Council for People with Intellectual Disability, the co-chair of the ACI intellectual Disability Network and a member of the City of Botany Bay Access Committee. She was the 2012 NSW Carer of the Year and this year at National Palliative Care week spoke about her palliative care journey in Canberra and helped pass a motion regarding better palliative care education for health professionals.
MARIA HEATON
Mary is currently a Branch Manager with the National Disability Insurance Scheme (NDIS) and in that position is responsible for the arrangements with providers who will deliver services to NDIS participants. In addition, the team working with Mary is putting in place the framework for quality assurance for the Agency as well as how feedback from participants and providers will contribute to improvements in the quality of service delivery and the Agency’s performance.

During her career Mary has occupied senior positions in WorkCover NSW, the Motor Accident Authority of NSW and with CRS, a large national provider of vocational rehabilitation services. In 2008, Mary was the recipient of the inaugural Award for Outstanding Contribution to Injury Management by an Individual from the Personal Injury Education Foundation and she remains a significant contributor to their education and events subcommittees.

In her current role, Mary is able to combine her knowledge and professional experience as a rehabilitation counsellor with her managerial experience in injury and disability management to construct the framework that will enable quality service provision by NDIS staff and the community of providers who will assist Australians with disability to achieve an optimal level of economic and community participation.

CAROL WELSH
Carol is a Registered Nurse with over 30 years clinical and management experience in the community disability services sector. Carol has worked in a variety of leadership roles in various community services such as large scale residential services, community group homes, day programs and multidisciplinary community teams. Carol is currently working for Epilepsy Action Australia, training disability services staff, providing advice and education to people with epilepsy, their families and carers as well as working within the management team to develop the strategic plan and expand the service. Additionally she has been a crisis advocate for people with an intellectual disability, lectured to nursing students at University of Western Sydney and facilitated workshop programs for students of the Diploma of Community Services Management and conducted consultancy projects for government and Non Government Organisation’s.

PROGRAM SPEAKERS

MS LEANNE BOWIE
Bachelor of Nursing and Master of Nursing Studies
(Nurse Learning and Development Officer)
Leanne has worked at Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North) for 32 years in various capacities to her current position as a Nurse Learning and Development Officer. One of Leanne’s many interests is the management of Enteral Feeding. Leanne is a Key Word Sign Presenter and was responsible for founding the “Signing Stars” sign choir.

MS VICKI BELL
Bachelor of Speech Pathology (Speech Pathologist)
Vicki has been working for five years in the Disability sector with adults with complex health care needs and complex communication difficulties across the four sites of Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North). Vicki is a key Word Sign Presenter and has the privilege of leading the Hunter Residences “Signing Stars”.

MS RACHAEL FILBY
Bachelor of Applied Science, Occupational Therapy
(Occupational Therapist)
Rachael has been working within the Disability sector in Community and Large Residential settings with both paediatric and adult clients. For the last 7 years Rachael has been working within Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North). Prior to this she worked overseas and with The Cerebral Palsy Alliance. One of Rachael’s primary interests is in developing customised seating systems for people with complex health care needs.
MRS AIMEE TAYLOR
Bachelor of Nutrition & Dietetics, First Class Honours (Dietician)
Aimee has been working within the Disability sector in Community and Large Residential settings in both metropolitan and regional areas for 2 years and is currently working at Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North). Aimee has experience in the management of enteral feeding for adults and children.

SANDRA CAPITO
Bachelor of Nursing (Disability Nurse Consultant, Victoria)
Sandra has worked at Yooralla (Victoria) since August 2012. She previously worked at a Medicare Local and was involved in program management. In addition Sandra has worked extensively in General Practice. She has taught at TAFE and has co-ordinated post graduate courses at Melbourne University and has been a clinical teacher.

JULIEANN CRAWLEY
Bachelor of Nursing (Registered Nurse)
Julieann is a Registered Nurse and began working in a large residential Centre in 1980 Julieann worked as a hospital based trainee in nursing in residential setting that provided all client care. She is now a specialist in wound care and incontinence management at Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North).

LOUISE UNDERY
Bachelor of Nursing (Registered Nurse)
Louise is a Residential Unit Nurse Manager (RUNM) Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North) and has worked in this large residential centre since 1981. Louise began working as Registered Nurse and is now a Residential Unit Nurse Manager and is responsible for the needs of 28 individuals with a disability who have complex intellectual, physical, health and medical needs.

TANIA EDDON
Bachelor of Health Science (Occupational Therapist)
Tania Eddon is an Occupational Therapist and has been working at Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North) since 2005. Tania is involved in the assessment, treatment and equipment prescription for individuals who have complex intellectual and physical disabilities to enable independence and improve their quality of life.

ROSS M FEAR
Registered Nurse, Editor Global Gazette Disability and Manager Education and Development for Global Disability and Health Care Services
Ross is currently the Manager Education and Development for Global Disability and Health Services. Ross has extensive experience with state and federal government and non–government organisations in senior management, advisory roles and staff education in areas including health, employment and economic development. He holds a significant number of graduate and post graduate qualifications.

TANYA HAZLEWOOD
Network Manager, Nutrition (Nutrition in Hospitals and Home Enteral Nutrition)
Tanya studied nutrition and dietetics at the University of Wollongong in NSW and then worked as a clinical Dietician at a number of rural and metropolitan hospitals within NSW. In 2005, Tanya was appointed manager of the nutrition and dietetics department at Liverpool Hospital in Sydney. She commenced in her current role as the Network Manager for Nutrition within the NSW Agency for Clinical Innovation (ACI) in August 2011.

KIRSTEN CAMPBELL
Network Manager, Gastroenterology
Following graduation in the U.K, Kirsten spent nine years working in the National Health Service in a variety of roles; latterly working in South London in a Primary Care Trust. In late 2001 Kirsten arrived in Australia and was appointed to the position of Workforce Manager at the Postgraduate Medical Council (now the Health Education and Training Institute). In 2012 she commenced in her current role of Network Manager for Gastroenterology at the Agency for Clinical Innovation (ACI).

VICKI MANTON
Disability Nurse Consultant, Victoria
Vicki worked as a registered nurse within the acute public and private health sectors for 23 years before completing secondary teaching degrees and moving into the disability sector. She has worked for Yooralla (Victoria) for five years as part of the Health Support Team. This unit is responsible for the training of disability staff, the writing of Health Support Plans for clients and consultation and facilitation of health needs support for clients within Yooralla services.

MS MARIJKE MITCHELL
Masters of Nursing by Research (Clinical Nurse Consultant, Developmental Disability)
Marijke currently works in Developmental Medicine, Royal Children’s Hospital, and Melbourne as a Clinical Nurse Consultant – Developmental Disability. Marijke has over 20 years’ experience in paediatric nursing working in many specialty areas as well as in postgraduate education at The University of Melbourne. Marijke holds qualifications in paediatric nursing, paediatric intensive care and a Masters of Nursing by Research. She is currently the project lead for a number of clinical, quality and training projects in her department.

DR NATHAN J WILSON
Senior Lecturer
Dr Wilson is a disability nurse and researcher with an interest in research and programs that enhance the social and economic participation of people with a disability.

DR PATSIE FRAWLEY
Research Fellow
Dr Frawley is a researcher and policy advocate for people with intellectual disability. Her research focus is on self advocacy, inclusive
outcomes that have at times defied some of the literature of the day. Therapists, Dieticians and Nurses that on average, has shown positive at this teams approach involving Speech Pathologists, Occupational incorporate best practice from all disciplines. This presentation looks approach to look at the person from a holistic perspective and Enteral feeding should ideally involve a collaborative interdisciplinary be presented, as well as the decision-making processes in difficult or Some of the significant literature and Best Practice Guidelines will perspective which has changed and evolved over the last 20 years. Large Residential Centre, sharing experiences from a multidisciplinary This presentation will reflect on the journey of enteral feeding in a ENTERAL FEEDING FROM A LARGE RESIDENTIAL CENTRE “DON’T TAKE IT LYING DOWN”– SHARING THE JOURNEY OF ENERAL FEEDING FROM A LARGE RESIDENTIAL CENTRE Ms Leanne Bowie, Nurse Learning and Development Officer Hunter Residences NSW, Ms Vicki Bell, Speech Pathologist Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North), Ms Rachael Filby, Occupational Therapist Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North) and Mrs Aimee Taylor, Dietitian Large Residential Centre Specialist Supported Living State-wide Services North (LRCSSL SS North)

This presentation will reflect on the journey of enteral feeding in a Large Residential Centre, sharing experiences from a multidisciplinary perspective which has changed and evolved over the last 20 years. Some of the significant literature and Best Practice Guidelines will be presented, as well as the decision-making processes in difficult or complex situations.

Enteral feeding should ideally involve a collaborative interdisciplinary approach to look at the person from a holistic perspective and incorporate best practice from all disciplines. This presentation looks at the teams approach involving Speech Pathologists, Occupational Therapists, Dieticians and Nurses that on average, has shown positive outcomes that have at times defied some of the literature of the day.

It is this team’s experience that a collaborative approach should initially begin with planning, training and education. The importance of maintaining the involvement of all members of the team in the management of enteral feeding is considered essential.

Areas which will be addressed in the presentation include maintaining some oral feeding for the person’s enjoyment, maintaining a healthy oral environment, and ensuring upright positioning and the highly underecognised risk of Refeeding Syndrome in order to maximise beneficial outcomes for each person.

The team’s experience of planning, preparation and ongoing team involvement has made the difference in securing positive outcomes for individuals. The wisdom gained from this journey has allowed an improved quality of life and expanded opportunities for life participation for people receiving enteral feeding.

A CLINICIANS’ GUIDE TO CARING FOR PEOPLE WITH GASTROSTOMY TUBES AND DEVICES
Kirsten Campbell, Network Manager, Gastroenterology, NSW Agency for Clinical Innovation and Tanya Hazlewood Network Manager, Nutrition, NSW Agency for Clinical Innovation

The Agency for Clinical Innovation (ACI) is the lead agency in NSW for promoting innovation, engaging clinicians and designing and
implementing new models of care. The ACI’s Clinical Networks, Taskforces and Institutes provide a forum for doctors, nurses, allied health professionals, managers and consumers to collaborate across the NSW health system.

In 2012, the ACI’s Gastroenterology and Nutrition Networks identified that there were no NSW wide guidelines in place relating to the insertion and management of gastrostomy tubes. Members of the Gastroenterological Nurses College of Australia (GENCA) who were also members of the ACI’s networks reported that GENCA had also discussed the need to develop guidelines in this area. Therefore in 2012 GENCA and ACI agreed to work on a joint project to develop national evidence based guidelines relating to the care of people with gastrostomy tubes and devices.

A multidisciplinary Guideline Development Group (GDG) was established, with members from both GENCA and ACI to prepare initial content and oversee the project. Members of the GDG included experienced nurses, allied health professionals and medical specialists from New South Wales, Queensland and South Australia. The group has been working for the last eighteen months on developing the guidelines.

The guidelines aim to provide clinicians with recommendations and practical advice relating to the care of adults and children with gastrostomy tubes and devices. It covers the different stages of the patient journey from deciding to initiate gastrostomy feeding to ongoing care, permanent tube removal and transition or transfer of care. They are applicable across health care settings and are designed to provide a framework for the development of local policies and procedures.

The recommendations contained within these guidelines were derived from a combination of clinical evidence, clinical experience and expertise. A significant amount of evidence in this area is of a low grade or in some cases not available. Randomised control trials are limited due to ethical constraints and research challenges. Further research is required in most aspects of gastrostomy tube/device care, especially in the area of ongoing care.

Finalisation of the Guidelines:

ACI will present the finalised guidelines, the key recommendations and how the guidelines relate to people with a developmental/intellectual disability and their families, carers and professionals.

A multi-disciplinary approach was used involving Nurses, Dietitian and Occupational Therapist as well as specialists in incontinence aids to develop individualised incontinence plans.

A positive outcome has been achieved for individuals living in this service who have an individualised incontinence plan resulting in improved health and well being, quality of life and participation and inclusion in community activities.

WHAT IS OLD IS NEW AGAIN AND THE CHALLENGE FOR THE FUTURE: CAN WE DO IT AGAIN IN THE CONTEXT OF THE NDIS

Ross M Fear, Editor Global Gazette Disability and Manager Education and Development Global Disability and Health Care Services

Disability Nurses historical involvement in the move to community living and individual person centred planning in the 1970s and 1980s are the forgotten foundations of today’s services. Can we reinvent ourselves for the future?

Some key historical milestones have led us to where we are now. Different states of Australia evolved at different times, each watching and learning from the others experience, as the revolution spread all across Australia. Along the way sector groups like National Disability Services (NDS), professional societies such as Australian Society for Intellectual Disability (ASID) and the emergence of Professional Association of Nurses in Developmental Disability Australia Inc. (PANDDA) were key to the national exchange of ideas through conferences, seminars, newsletters and journals.

Before the Richmond Report and before government policies for disability services and community living, nurses were involved in separating disability services from under the umbrella of mental health services in large psychiatric centres initiating programs to meet the needs of people with disability.

In the 1970s the first hostel and community group homes in the history of NSW were opened and nurses were involved in the development of person centred individual assessment and planning.
Disability nurses were the leaders in the community that enabled the initial success of the Richmond Report. It was those nurses with their knowledge, experience, motivation and vision who saw new alternatives for the people with disabilities and took the initiative to create more innovative options for service delivery and support.

A new era is unfolding with the NDIS. There are many people with disabilities in the community with complex needs, some with medical and health issues, some requiring regular reliable support beyond the knowledge and skills of care workers. Drawing on our training, knowledge, skills and experience now is the time for disability nurses to reinvent a new future for their role – what will it be? – specialist health services, community clinical rounds, agency drop in support?

PROVIDING AND VALUING HEALTH SUPPORT FOR PEOPLE WITH DEVELOPMENTAL/INTELLECTUAL DISABILITY

Sandra Capito, Disability Nurse Consultant, Victoria

The aim of the presentation is to highlight the value and involvement of nurses in a changing service system providing health support for people with disability.

The missing link between disability and health is at the forefront of our work on a daily basis. People are often supported by workers where the support required is beyond the knowledge and skills of care workers when undertaking care that involves addressing complex medical and health needs. Conversely, primary care and hospital care although well equipped to cater to the medical complexity often are challenged when disability occupies that realm as well.

The presentation aims to focus on achievements and examples of how clinical knowledge has impacted on the health outcomes of people with disability in the experience of a Victorian organisation.

A significant role is liaising, collaborating and educating hospitals to achieve positive admission and discharge planning and at the same time maintaining a person-centred approach. Advocacy for clients, their families and staff makes up a major component of the work. Our goal is to achieve equitable access to health care, that includes equitable health outcomes and quality of life for people living with disability. The use of case studies to highlight the effectiveness of the role of the disability nurse consultant will be included in the presentation.

THE UTILISATION OF ONLINE WEBINAR TECHNOLOGY TO PROVIDE HEALTH INFORMATION TO FAMILIES OF CHILDREN WITH A DEVELOPMENTAL DISABILITY

Marijke Mitchell, Clinical Nurse Consultant, Developmental Disability, Royal Children’s Hospital Melbourne Victoria

Parents and caregivers of children with a developmental disability often need to become experts in their child’s condition, potential complications, therapies and interventions in a short space of time. Modern technology provides opportunities for having this information to be accessible for families living in a range of geographical locations when they need it and in a way that does not create an additional time and care burden.

The aim of this pilot study was to determine the feasibility and acceptability of providing health information to families of children with a developmental disability using live online webinars. The webinars were designed to provide evidence-based information on a range of topical issues and provide families with the opportunity to connect with developmental disability specialists.

A series of three webinars were presented on a range of developmental disability topics specifically for parents and carers of children with a developmental disability using the GoToTraining software. Parents who attended the live webinars completed a survey to assess the usability and acceptability of this mode of health information provision.

Twenty-eight parents completed the survey after attending one of the live webinar training events. The technology was reported to be easy to use by 82% of participants and 100% indicated that they were interested in attending future webinars.

Evaluation of the webinar events demonstrated that live webinars were an acceptable and accessible mode of learning for parents and carers who are time poor due to the constant complex care needs of their child with a disability.

The findings of this pilot study support the use of web based education as an acceptable mode of training for parents, carers of children with a developmental disability. These results have important implications for practice as the utilisation of reputable online health information allows e-patients to make informed medical decisions and can boost their engagement in their health care management. This presentation will report the findings of the study and discuss the experience of providing web based education and support to families of children with a disability, outlining current e-learning innovations that are in progress as a result of this study.

PROVIDING PALLIATIVE AND END OF LIFE CARE IN RESIDENTIAL DISABILITY SERVICES

Vicki Manton, Disability Nurse Consultant, Victoria

The presentation identifies the issues for staff and clients when palliative and end of life care are provided within residential disability services.

Planning for and providing palliative and end of life care with/for a person who has intellectual disability is challenging and made more so when the primary support staff have little or no knowledge of Limitation of Treatment (LoT) or Advanced Care Planning (ACP) documentation.

Care often becomes the responsibility of multiple disparate care teams with limited understanding of the functions and limits of co-carers. The presentation highlights how the gaps in current practice may negatively impact outcomes for clients and ongoing staff wellbeing.

Content of Presentation:

1. Overview of a service provision shift to provide palliative and end of life care within residential disability services, increase for this demand...
into the future as the disabled population ages and more people with intellectual disability (ID) previously cared for in the family home move into supported accommodation because of aging carers/partners.

2. Summation of a discussion paper that analysed and discussed a Victorian health support teams recent experience supporting disability services with providing palliative and end of life care to clients. Central themes include specific knowledge and skills needed by staff to successfully provide palliative and end of life care in the residential setting, OH&S issues for staff, quality of guidance from Department of Human Services, Gaps in understanding and management of legal documents that support LoT and ACP and how successful outcomes have been for clients.

3. Highlights of additional issues discussed in recent literature.

A DIAGNOSTIC MINEFIELD: OLDER PEOPLE WITH DOWN SYNDROME
Miriam Philomena, Information, Training and Support Team (Adults), Down Syndrome Association NSW
People with Down syndrome (PwDS) are living longer than ever before. Information about how aging impacts people with the syndrome is available but scant, and misinformation is rife. Negotiating a health care system that, by its very nature, is diagnostic can be a minefield not only for older people with Down syndrome but also the professionals involved in their care.

Best practice within a changing service system challenges traditional paradigms that identify problems as deficits that reside within the person. Understanding life span issues in relation to typical behaviour in PwDS helps define the continuum of normal to abnormal.

With this in mind Down Syndrome NSW has developed a range of key qualifiers to consider when working in a health setting with older PwDS. Based on the theory that ‘all behaviour is communication’ we examine common behavioural responses by older PwDS that provide a framework for understanding circumstances that impact on diagnosis. Concrete strategies built around understanding nonverbal communication and taking the time to learn the unique language for each person, may seem idealistic in a time limited work place but prove to be a good investment in preventing future time consuming crisis management.

By increasing our knowledge of aging in PwDS, in conjunction with greater skills in identifying non-verbal indicators, health professionals can increase their ability to work in a people-centred framework as well as their ability to negotiate the diagnostic minefield and deliver better results to older patients with Down syndrome.

EPILEPSY, AGEING AND INTELLECTUAL DISABILITY
Carol Welsh, Epilepsy Action Australia
The ageing process brings different and sometimes complex challenges to us as individuals and to the health services we depend upon. A person who has an intellectual disability faces these same challenges and more.

It is clear that the incidence of epilepsy is much more common in the population of people who have an intellectual disability than in the rest of the community. The prognosis is worse and the higher rates of multiple antiepileptic medications result in more side effects. This can lead to higher (and possibly unnecessary) treatment costs and poorer quality of life. This presentation highlights key concerns and need for improved diagnosis and support in older individuals who happen to also have an intellectual disability.

The nurse who specializes in developmental disability is a key partner in a multi-disciplinary team and has the opportunity and responsibility to provide insights, support and co-ordination to other professionals in the delivery of best practice epilepsy management.

The presentation will touch on challenges in later life, identifying possible undetected seizures, safety and lifestyle consequences and need to challenge current diagnoses.

WHAT ARE AUSTRALIA’S NURSES TAUGHT ABOUT INTELLECTUAL DISABILITY? RESULTS FROM A NATIONAL CURRICULUM AUDIT
MS Beth Turner, Project officer, University of NSW
Professor Julian Trollor, Chair of Intellectual Disability Mental Health University of NSW Australia Head of Australian Institute of Health Innovation (3DN)

Aims: Australians with intellectual disability (ID) experience a higher burden of disease and poorer health outcomes compared to the general population.

As the largest health professional group in Australia, nurses play an important role in the delivery of healthcare services to people with an ID. However, the nursing profession’s ability to deliver appropriate and timely health care to this population is hindered by lack of education in Intellectual disability health (IDH) and (IDMH).

We are conducting a five phase project that aims to develop and implement a national training framework for registered nurses in the area of IDH and IDMH across the tertiary education sector. Phase one of the project, a national audit of registered nursing curriculum described here. This phase aims to determine how nursing schools are currently preparing registered nursing graduates to provide care to people with an intellectual disability (ID).

Thirty-four Nursing Schools currently accredited to provide a registered nursing program were invited to participate in the audit. Data from telephone and online audit surveys were collected and analysed using both descriptive and content analysis.

Overall content in IDH and IDMH was limited, and varied between nursing schools. Results will be presented and discussed in detail including: the amount of ID content currently taught, the nature of the content, and who teaches.

A national ID training framework will help to better prepare nursing trainees to meet the needs of people with an ID.
TRANSITION TO RETIREMENT: OUTCOMES FROM A 3-YEAR STUDY OF INCLUSIVE COMMUNITY PARTICIPATION

Professor Roger J Stancliffe, Professor of Intellectual Disability, University of Sydney

Aims: Does participation in mainstream community groups at the transition to retirement phase of life offer health and social benefits to older adults with long-term disabilities?

Method: Matched intervention and comparison groups each consisted of 29 older individuals with disability. While attending their individual inclusive community group one day per week, intervention-group participants received support from community-group members trained as mentors. We assessed participants’ loneliness, social satisfaction, depression, life events, quality of life, community participation, social contacts, and work hours before and six months after joining a community group.

Results: Twenty five (86%) of the intervention group attended their community group weekly for at least 6 months. They increased their community participation, made an average of four new social contacts, and decreased their work hours. Intervention participants were more socially satisfied post intervention than comparison group members.

Conclusion: The results demonstrate that participation in mainstream community groups with support from trained mentors is a viable option for developing a retirement lifestyle for older individuals with disability.

YOUNG ADULTS WITH INTELLECTUAL DISABILITY AND TRANSITION STAFF REFLECT ON SEXUAL HEALTH NEEDS – EXPERIENCE, WISDOM AND EDUCATION

Dr Nathan J Wilson, University of Western Sydney and Dr Patsie Frawley, University of Western Sydney

Aims: What kind of sexual health support do young adults with ID want and what role does the Transition to Work program play in providing effective sexual health education and support?

Method: We conducted 4 separate focus group interviews with young men (n=14) and young women (n=11) with ID attending Transition to Work programs in NSW. We also conducted 3 separate focus group interviews with disability transition staff (n=17). Data were analysed using the constant comparison method of grounded theory.

Results: Young people with ID want to develop relationships, but gendered messages about sexual safety lead to a fear-based and risk-aversive lifestyle that, through socio-sexual regulation, deny opportunities to rehearse and hone knowledge about sex. The disability system currently does not provide opportunities for young adults with ID to develop, rehearse and hone sexual health knowledge.

Conclusion: Future in-depth research needs to explore the perceptions, expectations and concerns of parents and other unpaid caregivers. We need to develop and test socio-sexual interventions that will not only offer increased socio-sexual knowledge, but also the social context in which to rehearse and hone this knowledge.

MATERNITY CARE FOR WOMEN WITH INTELLECTUAL DISABILITY

Ms Namira Williams, Clinical Midwife Specialist, Manning Hospital, Taree (Hunter New England Health District) NSW

Up to sixty percent of women with intellectual disability will have their child removed from their care. Despite this, these women do not feature as an identified vulnerable group within current New South Wales (NSW) Maternity Care documents. The NSW Safestart documents (2009), which aim to identify at-risk women during pregnancy and underpins Maternity care practice, does not include this consumer group as of particular concern. There is a paucity of research in Australia and internationally on the issues for women with intellectual disability during pregnancy and early postnatal periods.

This presentation highlights what is currently known about maternity care for these women, and provides the basis for the authors proposed research. The aim of which, is to assist clinicians, policy-makers and other relevant services develop and implement appropriate models of maternity care for women with intellectual disability that better meet their needs and reduce the likelihood of losing care of their child.

This presentation will provide an overview of the context in which maternity care for women with intellectual disability is situated, with specific reference to current Disability and Maternity policies within New South Wales.

Previous research undertaken both within Australia and internationally will be presented, with a discussion of the findings and gaps. These issues are further positioned within the broader policy context. A summary of the authors proposed research to address gaps with particular reference to Maternity Services, health providers and women with intellectual disability will also be presented.
CONFERENCE AWARDS

In the 1990s PANDDA decided to acknowledge Nurses who presented papers at the Annual Conference with two awards. The awards recognise the best overall presentation and the presentation with the most promise by a novice presenter.

The selection criteria stipulate that the winners of these two awards must be either a Registered or Enrolled Nurse and that the presentation must be of relevance to Developmental/Intellectual Disability Nursing. The winners of the two awards are determined by a select group of conference delegates.

In 2011, the PANDDA committee decided to name the awards in honour of two Nurses who have consistently demonstrated commitment, advocacy, leadership and compassion for people living with a disability, their families and to the Nurses who support them.

These two Nurses are Dr. Chris Atkins and Mr. Bob Weaver OAM.

In 1984, Chris and Bob were members of a small working party to determine what knowledge, skills and attributes Nurses required on graduation from Nursing studies at Colleges of Advanced Education. It was through this project that the idea of a professional organisation for Nurses working in disability was first conceived. After a suitable gestational period, PANDDA was born. Chris and Bob were, of course, founding members.

CHRIS ATKINS AWARD

The CHRIS ATKINS AWARD is to be awarded to the presentation voted as the best at the conference.

Chris Atkins has a younger brother with an intellectual disability and has worked in the area of Developmental/Intellectual Disability Nursing since 1969. During her career Chris’s focus has been on the education of Nurses about the complex health care needs of people with disabilities. Chris has consistently advocated for the role of Nurses in the provision of health care to people with disabilities through various committees, conference presentations and publications.

With the assistance and commitment of many Nurse clinicians, Chris was awarded her PhD in 1999 for her research on Nurses’ perceptions of quality of life for people with severe multiple impairments. As a clinician, Chris has been pivotal to the success of one service’s devolution from an institutional setting to the community by developing a model of Nursing and health care planning that supports clients with complex and chronic health care needs, their families and the work of the Nurses who support them. Chris’ services to PANDDA include the roles of President, Secretary and Technical Program Convenor for the annual conference. Chris believes that people with disabilities and their families have a right to a professional service from the best educated and creative Nurses who practise from an evidence base.

BOB WEAVER AWARD

The BOB WEAVER AWARD is to be awarded to the presentation voted as the one with most promise by a novice presenter.

Bob Weaver has worked in the area of Developmental/Intellectual Disability Nursing since 1975 as a clinician, lecturer, leader and manager. He is known for his strong advocacy for people with disabilities through his work on the Guardianship Tribunal, the establishment of a disability recreation project in the Blue Mountains, the devolution of an accommodation service, membership of various committees, and action on behalf of individuals. He holds a Diploma of Administration (Nursing) and Graduate Certificate in Nursing (Disability). Bob is a Member of the NSW Council for Intellectual Disability and is a Foundation Fellow and Life member of the Australian College of Mental Health Nurses an organisation in which he held positions at both state and national levels through the late 1980s and 1990s and early 2000.

Bob has served as PANDDA President, Vice President, Executive member and Conference Convenor for 19 of the 24 Annual Conferences. It is in this latter role that Bob is known for his encouragement of Nurses to present their knowledge and experiences to others. Bob also convened the working party that developed PANDDA’s Standards for Professional Practice. Bob represents PANDDA on both state and national committees and has, over the past 24 years, often been the sole voice on these committees advocating for the recognition of the role Nurses play in supporting people with developmental/intellectual disability. Bob remains passionate about the right of people with intellectual disabilities to live their lives to their fullest potential and the professional role that Nurses play in supporting them to achieve their goals.
A BRIEF HISTORY OF PANDDA INC

In 1983 with a move towards nurse education in Colleges of Advance Education and later Universities, a group of nurses came together to ensure the professional interest and standards of nurses supporting people with intellectual disability would be maintained. They formed a Working Party, at the suggestion of Meryl Caldwell-Smith AM, Chief Nursing Officer for the New South Wales Department of Health. Their task was to produce ‘exit competencies’ showcasing the skills, knowledge and expertise that nurses graduating from colleges and universities would need in order to support people with an intellectual disability. The Working Party was made up of Dr Chris Atkins PhD, Diana Dalley, Ross Fear, Elisabeth van Leeuwen, Bob Weaver OAM and Carol Welsh.

‘Meryl was looking out for us, when she suggested we needed to do something about nurse education. It took a year of work to produce the core elements/’exit competencies’ document, to ensure that the clinical skills of nurses would be maintained. (Bob Weaver OAM, 2014. Dawn to Dusk: Celebrating 200 Years of Service at Rydalmere).

From this undertaking, the Working Party saw a need for a professional organisation in order to have a greater advocacy voice, to represent and maintain the professional interest skills and knowledge of nurses caring for and supporting people with intellectual disability.

In 1989 the Professional Association of Nurses in Developmental Disability Australia (PANDDA) was established, led by nurses originally from Rydalmere, Marsden Centre, Grosvenor and Riverside along with staff from other residential centres, and university academics. Many nurses originally from Rydalmere and Marsden were foundation members; some like Norma Cloonan, Catharine Huls, Penny Kearney, Russell Jones, Chris Atkins and Bob Weaver remain active committee members today. One of the early committee members Chris Laurie came up with the original name for PANDDA, The Professional Association for Nurses working in Developmental Disability Areas. Later changed to The Professional Association of Nurses supporting people with Developmental Disability Australia. PANDDA Inc.

Through PANDDA, Nurses supporting people with a developmental disability were able to liaise with universities and government departments to ensure professional standards in developmental disability nursing were maintained, and the rights and self-determination of people with an intellectual disability were upheld and protected.

And now in 2014 PANDDA has entered its 25th Anniversary year.

PANDDA TIMELINE

1989
President: Diana Dalley
Vice President: Glenn Ball
Secretary: Chris Atkins
Treasurer: Catharine Huls
Committee: Rosemary Kyle, Roslyn Rowlands, Barbara Anderson, Kathryn Harris, Marie Cummins, William Fennett, Lyn Ramsay, Jan Lang, Russell Jones, Denise Heap, Isla Bowen, Johanne Dawson, Lynette Booth, Margaret Gerry, Jeffrey Green, Penny Kearney, Shanny Ooi, Stephanie McMahon, Rae Samuel, Bob Weaver and Lisa White

1990
President: Susan Gallagher
Vice President: Glenn Ball
Secretary: Chris Atkins
Treasurer: Catharine Huls
2nd Conference: Empowerment: Marketing the Professionalism of Nurses in Developmental Disability.
Convenor: Glenn Ball (Western Suburbs Leagues Club, Unanderra)

1991
President: Diana Dalley
Vice President: Glenn Ball
Secretary: Chris Atkins
Treasurer: Catharine Huls
Convenor: Glenn Ball (Gladesville Hospital)
25th PANDDA Conference & AGM
Wednesday 15 & Thursday 16 October 2014

1992
President: Margaret Gerry
Vice President: Helen Wright
Secretary: Chris Atkins
Treasurer: Catharine Hulst
Membership Secretary: Penny Kearney
4th Conference: Challenges of Developmental Disability Nursing: Moving On
Convenor: Bob Weaver (University of Western Sydney, Westmead Campus)

1993
President: Margaret Gerry
Vice President: Bob Weaver
Secretary: Helen Wright
Treasurer: Catharine Hulst
Membership Secretary: Penny Kearney
5th Conference: People with Developmental Disability and Their Families. 1994 The Year of the Family
Convenor: Bob Weaver (University of Western Sydney, Westmead Campus)

1994
President: Margaret Gerry
Vice President: Bob Weaver
Secretary: Norma Cloonan
Treasurer: Vivienne Gan
Membership Secretary: Penny Kearney
6th Conference: Transition & Nurses
Convenor: Bob Weaver (Rydalmore Centre, Rydalmere)

1995
President: Chris Atkins
Vice President: Bob Weaver
Secretary: Lorraine Bettison
Treasurer: Vivienne Gan
Membership Secretary: Penny Kearney
7th Conference: Best Practice
Convenor: Bob Weaver (Lachlan Centre, North Ryde)

1996
President: Chris Atkins
Vice President: Bob Weaver
Secretary: Lorraine Bettison
Treasurer: Russell Jones
Membership Secretary: Paula Finnstone
8th Conference: Professional Issues
Convenor: Rae Samuel (Blixtland Centre, Ryde)

1997
25th PANDDA Conference & AGM
Wednesday 15 & Thursday 16 October 2014

1998
President: Bob Weaver
Vice President: Sandra Hoot
Secretary: Cecily Spradbrook
Treasurer: Russell Jones
Membership Secretary: Paula Firnstone
10th Conference: Visions for the Future 2000 & Beyond
Convenor: Rae Samuel (Blaxland Centre, Ryde)

1999
President: Sandra Hoot
Vice President: Paul Hawes
Secretary: Norma Cloonan
Treasurer: Russell Jones
Membership Secretary: Mary MacPherson
11th Conference: Nurses in Developmental Disability: Who Needs Them?
Convenor: Lorraine Betisson (Epping RSL Club, Epping)

2000
President: Paul Hawes
Vice President: Bob Weaver
Secretary: Cecily Spradbrook
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
12th Conference: Diversity in Practice
Convenor: Cheryl Jones/Paul Hawes
(Epping RSL Club, Epping)

2001
President: Paul Hawes
Vice President: Bob Weaver
Secretary: Norma Cloonan
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
13th Conference: Developmental Disability Nurses: Promoting Healthy Lifestyles
Convenor: Bob Weaver (Epping RSL Club, Epping)

2002
President: Paul Hawes
Vice President: Norma Cloonan
Secretary: Paul Leckie
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
14th Conference: Developmental Disability Nursing: Where to from Here
Convenor: Cheryl Jones (Epping RSL Club, Epping)

2003
25th PANDDA Conference & AGM
Wednesday 15 & Thursday 16 October 2014

2004
President: Norma Cloonan
Vice President: Margaret Mason
Secretary: Lindy Isaksen
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
16th Conference: Developmental Disability Nurses: Lost or just harder to find?
Convenor: Bob Weaver (Epping RSL Club, Epping)

2005
President: Norma Cloonan
Vice President: Margaret Mason
Secretary: Mary MacPherson
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
17th Conference: Access & Equity: Health Care for People with Developmental Disabilities
Convenor: Bob Weaver (Epping RSL Club, Epping)

2006
President: Norma Cloonan
Vice President: Margaret Mason
Secretary: Mary MacPherson
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
18th Conference: PASSION: Imagine the possibilities... awaken your dreams and rediscover your passion for developmental disability nursing
Convenor: Bob Weaver (Epping RSL Club, Epping)

2007
President: Norma Cloonan
Vice President: John Ryan
Secretary: Cecily Spradbrow
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
19th Conference: Building & Connecting Bridges
Convenor: Bob Weaver (Epping RSL Club, Epping)

2008
President: Norma Cloonan
Vice President: John Ryan
Secretary: Cecily Spradbrow
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
20th Conference: Changing Times: Words, Experiences and Dreams
Convenor: Bob Weaver (Epping RSL Club, Epping)

2009
25th PANDDA Conference & AGM
Wednesday 15 & Thursday 16 October 2014

2010

President: Linda Goddard
Vice President: Norma Cloonan
Secretary: Cecily Spradbrook
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
22nd Conference: Owing Our Practice: Learn from yesterday, Live for today, Hope for tomorrow (Albert Einstein)
Convenor: Domain Hero/Rob Weaver; Technical Program Convenor: Chris Atkins (Mercure Hotel, Parramatta)

2011

President: Linda Goddard
Vice President: Norma Cloonan
Secretary: Sue Easton
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin
23rd Conference: Great Expectations: Take nothing on its look; take everything on Evidence. There is no better rule (Charles Dickens)
Convenor: Domain Hero/Rob Weaver; Technical Program Convenor: Chris Atkins (Novotel Hotel, Parramatta)

2012

President: Linda Goddard
Vice President: John Ryan
Secretary: Sue Easton
Treasurer: Russell Jones
Membership Secretary: Lorraine Coughlin/Norma Cloonan
24th Conference: Partnership & Possibilities – Nursing Practice in Disability. Models for health care and social equity. If opportunity doesn’t knock, build a door (Milton Berle)
Convenor: Domain Hero/Rob Weaver; Technical Program Convenor: Sue Easton Conference Registrar: Alicja Rogers (Novotel Hotel, Parramatta)

2013

President: Linda Goddard
Vice President: Bob Weaver
Secretary: Sue Easton
Treasurer: Russell Jones
Membership Secretary: Norma Cloonan
Convenor: Domain Hero/Rob Weaver; Technical Program Convenor: Sue Easton; Conference Registrar: Maree McCulloch (Novotel Hotel, Parramatta)
## PERSONAL AND PROFESSIONAL DETAILS

<table>
<thead>
<tr>
<th>SURNAME</th>
<th>FIRST NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>POSTAL ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SUBURB/TOWN</th>
<th>STATE</th>
<th>POSTCODE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COUNTRY</th>
<th>DATE OF BIRTH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HOME PHONE</th>
<th>EMAIL ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>WORK PHONE</th>
<th>MOBILE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OCCUPATION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EMPLOYER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>POSITION TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

## ACADEMIC AND PROFESSIONAL QUALIFICATIONS

<table>
<thead>
<tr>
<th>INSTITUTION</th>
<th>QUALIFICATION</th>
<th>YEAR AWARDED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## ANNUAL MEMBERSHIP FEES

- **Full Member (Registered and Enrolled Nurse)**
  - $110.00
- **Associate Member (Student in Nursing)**
  - $72.00

## PAYMENT OPTIONS

- **Direct Deposit**
  - Account Name: Professional Association of Nurses in Developmental Disability Australia.
  - Pay to PANDDA, BSB Number: 012370, ANZ Account Number: 938 560 797. Reference and payment description must be entered as surname and first name.
- **Personal Cheque or Bank Cheque (Australian dollars ONLY)**
  - Made payable to: Professional Association of Nurses in Developmental Disability Australia
- **Credit Card Payment (Visa or Mastercard)**
  - Visa
  - Mastercard

- Card Number:  
- Card Expiry Date: 
- CVC (last 3 digits back of card): 

## DECLARATION

I hereby apply for membership of the Professional Association of Nurses in Developmental Disability Australia Inc. (PANDDA). If accepted as a member I agree to be bound by the rules of the association.

<table>
<thead>
<tr>
<th>Signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## PANNDDA Objectives

To provide a professional association to represent, support and unite all nurses working in developmental disability areas.

To provide an environment which promotes the rights of people who have developmental intellectual disability and their families.

To provide consultancy and liaison with generic agencies.

To disseminate information and promote communication between national and international organisations related to the field of developmental intellectual disability and, in particular, nursing organisations.

To provide information and advice about career structures.

To promote the professional status of developmental disability nurses through:

- the development of standards and quality practice
- the advancement of nursing education in the area of intellectual developmental disability
- lobbying
- increased public awareness
- professional development activities.
MEMBERSHIP

Join a nursing group that disseminates information and promotes communication between national and international organisations related to the field of developmental intellectual disability.

The Professional Association of Nurses in Developmental Disability Australia Inc. (PANDDA) represents the professional interests of nurses who support people who have an intellectual developmental disability.

Visit www.pandda.net for more information.

Membership Benefits

- National networking and support for nurses working with people who have intellectual developmental disabilities
- A voice in many state and national bodies
- The PANDDA newsletter
- An annual PANDDA conference
- Collegial Support, networking and contribution to your profession
- A professional identity, recognition and autonomy
- Discount for PANNDAA conference and educational programs
- Information at www.pandda.net